

PTO/SB/21 (09-04)

Approved for use through 07/31/2006, OMB 0651-0031
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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1 Ent #

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/760333
		Filing Date	January 20, 2004
		First Named Inventor	Richard F. Gladney
		Art Unit	3673
		Examiner Name	M. Trettel
Total Number of Pages in This Submission	7	Attorney Docket Number	SMCY-P04-062

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form w/copy	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request w/copy	<input checked="" type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	This Return Receipt Postcard	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	ROPES & GRAY LLP		
Signature			
Printed name	Edward A. Gordon		
Date	August 9, 2005	Reg. No.	54,130

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 8-9-05

Signature: Denise Camerato (Denise Camerato)



AUG 11 2005

PTO/SB/17 (12-04v2)

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<p style="text-align: center;">Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p style="text-align: center;">FEE TRANSMITTAL</p> <p style="text-align: center;">For FY 2005</p>		Complete if Known	
		Application Number	10/760333
		Filing Date	January 20, 2004
		First Named Inventor	Richard F. Gladney
		Examiner Name	M. Trettel
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	3673
TOTAL AMOUNT OF PAYMENT		(\$)	1,150.00
		Attorney Docket No.	SMCY-P04-062

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 18-1945 Deposit Account Name: _____ Ropes & Gray LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s), under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	FILING FEES		SEARCH FEES		EXAMINATION FEES		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
14	- 20 =	x .	=	Fee (\$)
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee Paid (\$)
5	- 5 =	x .	=	

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50	(round up to a whole number) x	=	

4. OTHER FEE(S)

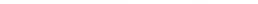
Non-English Specification \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1253 Extension for response within third month
1814 Statutory Disclaimer

1.020.00

SUBMITTED BY

SUBMITTED BY _____ **Registration No.** _____

Signature		Registration No. (Attorney/Agent)	54,130	Telephone	(617) 951-7066
Name (Print/Type)	Edward A. Gordon			Date	August 9, 2005

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 89-05

Signature: (Denise Camerato)